

ALABAMA DEPARTMENT OF HUMAN RESOURCES  
USE ALLOWANCE – SPACE

Project Name and Location  
Title: \_\_\_\_\_ of Building: \_\_\_\_\_

Name and Location of Building: \_\_\_\_\_

Type Construction	Date Acquired	Cost (Excluding Land & Federal Funds)	Rate	Annual Allowance
			2%	\$

Other Expenses Applicable to Entire Building (Specify Nature):

_____	\$ _____	
_____	\$ _____	
_____	\$ _____	
_____	\$ _____	\$ _____

Total Expenses Applicable to Entire Building: \$ \_\_\_\_\_

Total usable square feet: \_\_\_\_\_

Annual cost per square foot (divide total expense  
by total square feet) \_\_\_\_\_

Square feet to be used by project (details below) \_\_\_\_\_

Pro rata annual cost to project (annual cost per square foot X square feet  
Occupied by project) \$ \_\_\_\_\_

Percent of time chargeable to this project: x \_\_\_\_\_ %

TOTAL COST APPLICABLE TO PROJECT: \$ \_\_\_\_\_

SQUARE FEET TO BE USED BY PROJECT:

<u>Number and Type of Rooms</u>	<u>Size</u>	<u>Square Feet</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

TOTAL SQUARE FEET: \_\_\_\_\_

I hereby certify that the information shown in detail above as to the cost of the building  
(excluding land and federal funds) and any other cost applicable to the building is true and  
correct to the best of my knowledge.

Signed: \_\_\_\_\_ Title: \_\_\_\_\_